US Depărtment of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Månagement
and Budget
No 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440.



1. File Number U- 9343

3 Name and address of person filing

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

4 Name, file number, and address of labor organization.

11/04. Through 12/31/04

Name JOHN TACKETT	Name ROOFERS LOCAL 70	
	Labor Organization File Number 07-1-145	
P.O Box, Bldg , Room No., if arry	P.O. Box, Building and Room Number, if any	
Street 1451 OCD PINCENCY LD	Street 1451 OLD RINCKNEY RD	
State MI ZIP Code + 4 4884 75	State M. Zip Code+4 48943	
5 Position in labor organization.		
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.		
6 Name and address of Employer (including trade name, if any)	7 a Nature of Interest, Transaction, or Income	
Name	and the state of t	
Trade Name, If any P O Box, Bldg , Room No , If any		
	7 b Amount.	
Street	NA	
City " " ; " ;		
State ZIP Code + 4	A The C	
Signature		
15 Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete (See the section on penalties in the instructions)		
Signed Jehn Jarkett	on 944905 517-548-6554	
	Date Telephone Number	

The transactions, dealings and interests that are reported in the attached Form LM-30 Represent my good faith effort to reconstruct any reportable occurrences for calendar Year 2004. Some items may have been unintentionally omitted. If, in the future it comes to my attention that there is a matter which should have been reported for calendar year 2004, I will file an amended Form LM-30.

PRINTED NAME JOHN TACKETT	
SIGNATURE John Jackett	
Date 9 A 9 9 5	